Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I** SMALL ENTITY **OTHER THAN** (Column 1) (Column 2) TYPE \_\_ **SMALL ENTITY** OR **FOR** NUMBER FILED **NUMBER EXTRA** FEE FEE RATE RATE **BASIC FEE** 345.00 690.00 OR minus 20= **TOTAL CLAIMS** X\$18= X\$ 9= OR INDEPENDENT CLAIMS minus 3 = X39 =X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +260= +130= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **AFTER PREVIOUSLY AMENDMENT EXTRA FEE** FEE **AMENDMENT** PAID FOR Minus Total X\$ 9=X\$18= OR Independent Minus = X39= X78 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE **TIONAL** RATE TIONAL **AMENDMENT PREVIOUSLY AFTER EXTRA** FEE **AMENDMENT** PAID FOR **FEE** Total Minus X\$ 9= X\$18=OR Independent Minus = X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY** RATE **EXTRA AMENDMENT** PAID FOR **FEE FEE** Total Minus X\$ 9= X\$18= OR Independent Minus = X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

## BEST AVAILABLE COF

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09 663259

## Total Fee Calculation

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Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)

Office of Initial Patent Exam